



Healthy Families Program California Children's Services (CCS) and Serious Emotional Disturbances (SED) Carveouts

**Ruth Jacobs, R.N.
Assistant Deputy Director
Managed Risk Medical Insurance Board
November 6, 2008**



*Sometimes I think
I understand everything
and
Then I regain consciousness.*

ELIGIBILITY REQUIREMENTS



- Is an eligibility determination required?
 - YES.
- Who determines eligibility?
 - County CCS Program or County Mental Health Department
- Can member family refuse services once eligibility is determined?
 - YES. However, if the member receives services from non-paneled providers or from mental health providers who are not part of the county mental health program, the member is responsible for paying for the services.

PLAN RESPONSIBILITIES



- How do the carveouts work?
 - The plan is supposed to refer any member that may have a CCS or SED eligible condition to the local CCS program or the county mental health department for an assessment.

PLAN RESPONSIBILITIES



(cont'd)

- How does the plan interface with the local CCS program or the county mental health department?
 - The plan must enter into a Memorandum of Understanding (MOU) with the local CCS program and county mental health department that describes how the plan and the local CCS program or county mental health department will coordinate services on behalf of the HFP member.
 - Each plan must designate a liaison who will coordinate and collaborate with the local CCS program and county mental health department.

PLAN RESPONSIBILITIES



(cont'd)

- Does the plan have to continue to provide services to the member after the referral?
 - YES. Until the county establishes the member's eligibility for services to treat a CCS or SED condition, the plan is responsible to provide all medically necessary health, dental or vision care to the member.

PLAN RESPONSIBILITIES



(cont'd)

- Does the plan have to continue to provide services once the member is eligible for CCS or county mental health services?
 - The plan is NOT responsible to provide or pay for services authorized by CCS or the county mental health department
 - However, the plan **IS** responsible to provide all other covered health, dental or vision services.

PLAN RESPONSIBILITIES



(cont'd)

- Does the plan have any other responsibilities once a member is determined to have a CCS or SED condition?
 - YES. The plan must ensure coordination of services between plan providers, CCS or county mental health providers and the local CCS program or county mental health department.
 - The plan must report annually to MRMIB the number of members referred to CCS or the county mental health department.

Regulations, EOCS, and Contracts...Oh, my!!!!



- The requirement for treatment of children with a CCS or SED condition are contained in:
- HFP statute
- HFP regulations
- HFP Model Evidence of Coverage
- HFP Model Health, Dental and Vision Contracts
- MOUs between the local CCS program and county mental health department.



Questions?
